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ABSTRACT

This report summarizes an analysis of the Illinois State Board of Education's (ISBE) Funding and Child Tracking System (FACTS) for students with emotional/behavioral disabilities (EBD) from 1989-1996. The data indicate: (1) the numbers of youth identified with EBD as a primary disability increased by 13 percent; (2) older children, male children, and African American children are more likely to be identified with EBD than any other disability; (3) the percentage increase of youth identified with a secondary disability of EBD has increased at a much faster rate for Hispanics and African Americans; (4) percentages of youth in more restrictive settings have decreased over time; (5) older children and African American children, regardless of their gender, were significantly more likely to be placed in more restrictive educational settings including residential placement; and (6) individual school districts have dramatically decreased the percentage of youth with EBD for whom they pay room and board costs, while child welfare is now paying for a greater percentage of students. In addition to statewide analysis, data trends for regions of the state that have been involved in ISBE funded system of care initiatives and wraparound implementation are discussed. (CR)

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Can Statewide Special Education Data Inform System of Care Development?

Introduction

In Illinois, system of care initiatives have been supported by the Illinois State Board of Education (ISBE) since 1990-91. Intended outcomes include the improvement of community-based service networks while reducing excessive residential placements. Education dollars have also been invested in three-year demonstration projects, ongoing technical assistance, pooled flexible funds, facilitation of wraparound implementation through schools, and family involvement in interagency networks. Evaluation data indicates improved outcomes for children and families and reductions in out-of-community placements (Eber, Rolf & Schreiber, 1996 and Eber, 1996). Recently, ISBE has begun to look at the overall EBD placement trends in an effort to determine the possible impact of these initiatives on education programs and to seek information which may help guide continued improvements to the system of care development in Illinois.

This paper will summarize an analysis of the Illinois State Board of Education's (ISBE) Funding and Child Tracking System (FACTS) for students with emotional/behavioral disabilities (EBD) from 1989-1996. This includes placement trends, shifts in placing agencies, predictors of EBD and restrictiveness of settings. In addition to statewide analysis, data trends for regions of the state which have been involved in ISBE funded system of care initiatives and wraparound implementation are discussed. ISBE is looking at this statewide data to determine the possible impact of wraparound initiatives and to guide further improvements to system of care development in Illinois.

Methods

FACTS data were available for seven years (1989, $N = 28{,}680$ students, through 1996, $N = 33{,}320$). The database contains information such as youth's disability, educational placement, payer of residential placements, and demographic characteristics. Using this data, it was possible to create a longitudinal record for youth with a primary or secondary disability of emotional or behavioral disability (EBD) who received services for more than one year. In addition to descriptive reporting of data, regression analyses were used to examine the relationship of demographic characteristics to the identification of EBD as a primary disability. Regression analyses were also conducted to examine the relationship of educational setting to youth's demographic characteristics.

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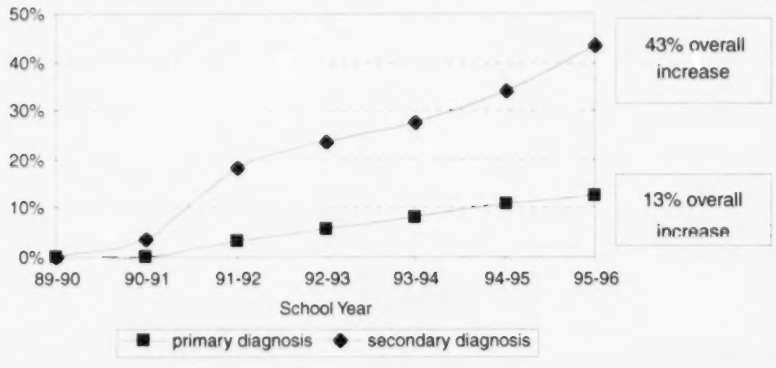
Results

Identification rates. The numbers of youth in Illinois identified with EBD as a primary disability have increased from 25,427 in 1989-90 to 28,654 in 1995-96, which represents a 13% increase. The number of youth identified with EBD as a secondary disability has increased by 43% since 1989 (see Figure 1). Age, ethnic background, and gender are strong predictors of the identification of EBD over time. Older children, male children, and black children are more likely to be identified with EBD than any other disability. White males are identified as having a primary disability of EBD more often than males and females of any other racial group.

The percentage increase of youth identified with a secondary disability of EBD has increased at a much faster rate for Hispanics and African Americans than Caucasians (see Figure 2). These uneven rates of increase were not found in the identification of EBD as a primary disability. The number of Caucasians identified with EBD has increased by 22%, and the number of Hispanics identified with EBD as a secondary disability has almost tripled. The number of Hispanics identified with EBD as a secondary disability has increased by 181% between 1989-90 and 1995-96. The number of African Americans identified as having EBD as a secondary disability has increased by 92% since 1989. Further analysis should examine these findings in light of changes in the demographics of all students in Illinois schools.

Figure 1
Percent Increase of Students with EBD as Primary or Secondary Disability



Restrictiveness of setting. In general, the percentages of youth in more restrictive settings have decreased over time while the percentages of youth in less restrictive school settings have increased. For example, the percentage of youth served in self-contained classrooms declined drastically from 1989 (N = 11,583) to 1996 (N = 10,270). However, the overall numbers of youth in both in and out-of- state residential care has remained fairly constant from 1989. It should be noted that the number of youth placed in residential facilities actually represents a decline in the percentage of youth served in these settings because the overall number of youth identified with EBD has increased over time.

In general, age and ethnic background are significant predictors of restrictiveness of educational settings, including residential placement. Older children and African American children, regardless of their gender, were significantly more likely to be placed in more restrictive educational settings including residential placement.

Guardianship. An analysis was also done of youth covered under the Illinois Orphanage Act, a state program that ensures education services for youth in placements through the other code agencies such as child welfare, mental health, and juvenile justice. While the number of youth served under these programs has increased only slightly over time, the guardianship of these youth has shifted substantially. Illinois' child welfare system has increased their guardianship from approximately 50% in 1989-90 to 84% in 1995-96. In contrast, the courts or probation department has decreased guardianship from 43% in 1989-90 to 13% in 1995-96. These trends could be related to changes in state guidelines for classifying these youth. In general, fewer children are residing in state institutions and detention centers, while a greater number of children are residing with foster families, in group homes, and in private facilities.

Source of funding. Analyses of room and board payer of youth who are in a residential placement indicate that individual school districts have dramatically

decreased the percentage of youth with EBD for whom they pay room and board costs from 53% of all youth in 1989-90 to 21% in 1995-96. Mental health has also significantly decreased the percentage of youth for whom they are paying the room and board costs from 20.5% in 1989-90 to 13.3% in 1995-96 while child welfare is now paying for a greater percentage of students. In 1989-90 child welfare served as the placing agent for approximately 49% of these youth, and by 1989-90 they were serving as the placing agent for 83% of the youth.

Analysis of System Trends

A set of analyses was conducted as a preliminary attempt to examine system trends in school districts where three-year demonstration projects (1991-1996) were located. It should be noted that although these analyses are not exhaustive and should be treated cautiously, they do offer insights for further discussion and examination. Overall the data suggest that greater percentages of youth were served in less restrictive settings in areas served by systems change projects. For example, the percentages of youth identified with EBD as a primary disability who spent less than 50% of their day in special education settings was examined. In 1989, youth in non-project sites were more likely to spend the majority of time in general education settings compared to youth in project sites. However, by 1995-96, a greater percentage of youth were served in these settings for project sites as compared to non-project sites (see Figure 3).

Figure 2
Percent Increase in Students with EBD as Secondary Disability by Ethnicity

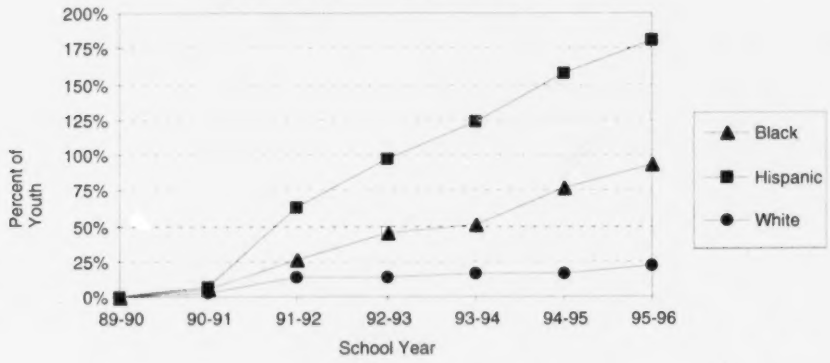
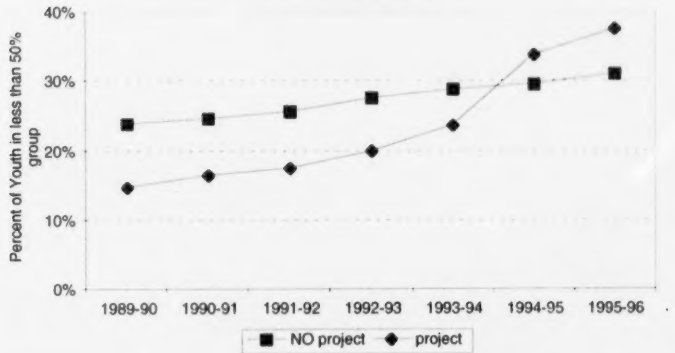


Figure 3
Youth Spending Less than 50% of Day in Special Education Setting



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The percentage of youth served by in-state and out-of-state residential facilities was higher for project sites in 1989-90 than for non-project sites. This may be explained by the fact that these sites with higher placement rates in residential facilities were specifically targeted as systems change project sites (see Figure 4 & 5). The percentage of youth served by in-state residential settings decreased dramatically for project sites in 1991-92, and although increased slightly from 1992 to 1994, remained significantly lower for project sites than non-project sites by 1995-96.

An examination of the percentages of youth served in out-of-state residential settings shows that, like the in-state residential settings, the percentages of youth served in these settings, was initially higher for project sites than non-project sites. However, after an increase for project sites in 1990-91 these rates remained fairly constant from 1991-90 to 1995-96 for both project sites and non-project sites.

Implications

This summary highlights findings of the preliminary analysis of a statewide EBD database which suggests trends for further examination. These include changes in identification rates, shifts in multi-agency placement patterns, and relationship of age and minority status to identification and placement of youth with EBD. In addition, data from sites where system of care initiatives have been located present opportunities for examining the results of such efforts over time.

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Figure 4
Youths Placed in In-State Residential Facility Over Time

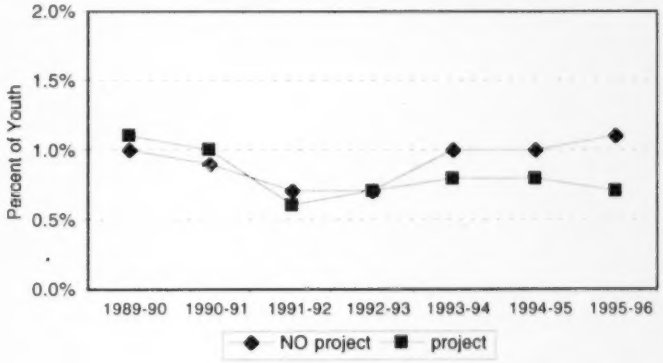

Figure 5
Percent of Youth Place in Out-of-State Residential Facility Over Time